

Minutes of the meeting of the Human Resources Committee of the Board of Directors of the Cook County Health and Hospitals System (CCHHS) held Tuesday, April 16, 2019 at the hour of 9:00 A.M. at 1950 W. Polk Street, in Conference Room 5301, Chicago, Illinois.

I. Attendance/Call to Order

Chair Richardson-Lowry called the meeting to order.

Present: Chair Mary B. Richardson-Lowry, Board Chair M. Hill Hammock (Substitute Member) and Director Mary Driscoll, RN, MPH (3)

Absent: Directors Heather M. Prendergast, MD, MS, MPH and Sidney A. Thomas, MSW (2)

Additional attendees and/or presenters were:

Claudia Fegan, MD – Chief Medical Officer

Jeff McCutchan –General Counsel

Beena Peters, DNP, MS, RN, FACHE – Chief Nursing Officer

Barbara Pryor –Chief Human Resources Officer

Deborah Santana – Secretary to the Board

John Jay Shannon, MD – Chief Executive Officer

Wayne Wright – Director of Organizational Development and Training

The next meeting of the Committee will be held on Tuesday, June 18, 2019 at 9:00 A.M.

II. Public Speakers

Chair Richardson-Lowry asked the Secretary to call upon the registered public speakers.

The Secretary responded that there were none present.

III. Action Items

A. Minutes of the Human Resources Committee Meeting of February 19, 2019

Board Chair Hammock, seconded by Director Driscoll, moved to accept the minutes of the meeting of the Human Resources Committee of February 19, 2019. THE MOTION CARRIED UNANIMOUSLY.

B. Any items listed under Sections III and VI

IV. Report from Chief Human Resources Officer (Attachment #1)

Barbara Pryor, Chief Human Resources Officer, reviewed her report, which included information on the following subjects:

- 2018 Employee Engagement Survey Overview
- Metrics:
 - HR Performance Data
 - HR Activity Report through 3/31/19
 - Separations by Classification through 3/31/19

IV. Report from Chief Human Resources Officer (continued)

- Open Vacancies
- Hiring Snapshot through 3/31/19
- Appendix – Nursing and Finance Hiring Snapshot through 3/31/19

With regard to the Employee Engagement Survey, Board Chair Hammock suggested that the administration set some quarterly milestones for its action plan, and report back to the Committee at appropriate intervals.

V. Recommendations, Discussion / Information Item**A. Strategic planning discussion: Nursing (Attachment #2)**

Beena Peters, DNP, MS, RN, FACHE, provided an overview of the presentation on Nursing, which included information on the following subjects:

- Nursing Mission Statement
- Nursing Organizational Chart
- Overview of Department
- Workforce Data
- Impact 2020 Recap – Status and Results
- National Database for Nurse Quality Indicators – Nursing Sensitive Clinical Indicators
- Intensive Care Data
- Patient Satisfaction 2018
- Nurse and Nurse Leaders Excellence Results – Employee Engagement
- FY2020-2022 – Environmental Scan of Market, Best Practices and Trends
- Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis
- FY2020-2022 Objectives and Highlighted Tactics
- Measures and Metrics
- Timeline

During the review of slide 14 of the presentation, regarding the nursing-sensitive clinical quality indicator relating to physical restraints, Chair Richardson-Lowry inquired whether the organization's higher rate of the use of restraints has anything to do with CCH's population, culture, or some other attribute. Dr. Peters responded that this needs to be studied further; she will look into the question and provide a response to the Committee.

During the review of Threats under the SWOT Analysis, the Committee discussed the subject of possible opportunities to engage and partner with local universities. Chair Richardson-Lowry suggested that the administration reach out to leadership at the Chicago Public Schools to collaborate on potential opportunities that would generate more interest by younger students to pursue a career in nursing.

During the discussion of slide 25 of the presentation, Chair Richardson-Lowry requested that "language barriers" be included as a bullet under the category of Weaknesses in the SWOT Analysis.

During the review of slide 27 of the presentation, Chair Richardson-Lowry inquired whether the nursing metrics will be reported quarterly. Dr. Peters responded affirmatively. Director Driscoll stated that she believes that nursing needs a quality structure, but also believes that it needs to be integrated into the overall hospital quality structure; perhaps dual reporting to the hospital quality structure and to nursing quality would be appropriate.

VI. Closed Meeting Items

- A. Report from Chief Human Resources Officer**
- B. Discussion of personnel matters**
- C. Update on labor negotiations**
- D. Discussion of litigation matters**

The Committee did not recess into a closed meeting.

VII. Adjourn

As the agenda was exhausted, Chair Richardson-Lowry declared the meeting
ADJOURNED.

Respectfully submitted,
Human Resources Committee of the
Board of Directors of the
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Mary B. Richardson-Lowry, Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

Requests/Follow-up:

- Follow-up: Regarding the Employee Engagement Survey, a suggestion was made for the administration to set some quarterly milestones for its action plan and report back to the Committee on those milestones at appropriate intervals. Page 2
- Follow-up: Regarding the nursing-sensitive clinical quality indicator relating to physical restraints, a request for information was made regarding the reasons or factors contributing to the organization's higher rate of the use of restraints. Page 2
- Follow-up: A suggestion was made for the administration to reach out to leadership at the Chicago Public Schools, to collaborate on potential opportunities that would generate more interest by younger students to pursue a career in nursing. Page 2
- Request: A request was made to include "language barriers" as a bullet under the category of Weaknesses in the SWOT Analysis. Page 2

Cook County Health and Hospitals System
Human Resources Committee Meeting
Tuesday, April 16, 2019

ATTACHMENT #1

Human Resources Metrics CCH Board of Directors

Barbara Pryor
Chief Human Resources Officer

April 16, 2019



Cook County Health

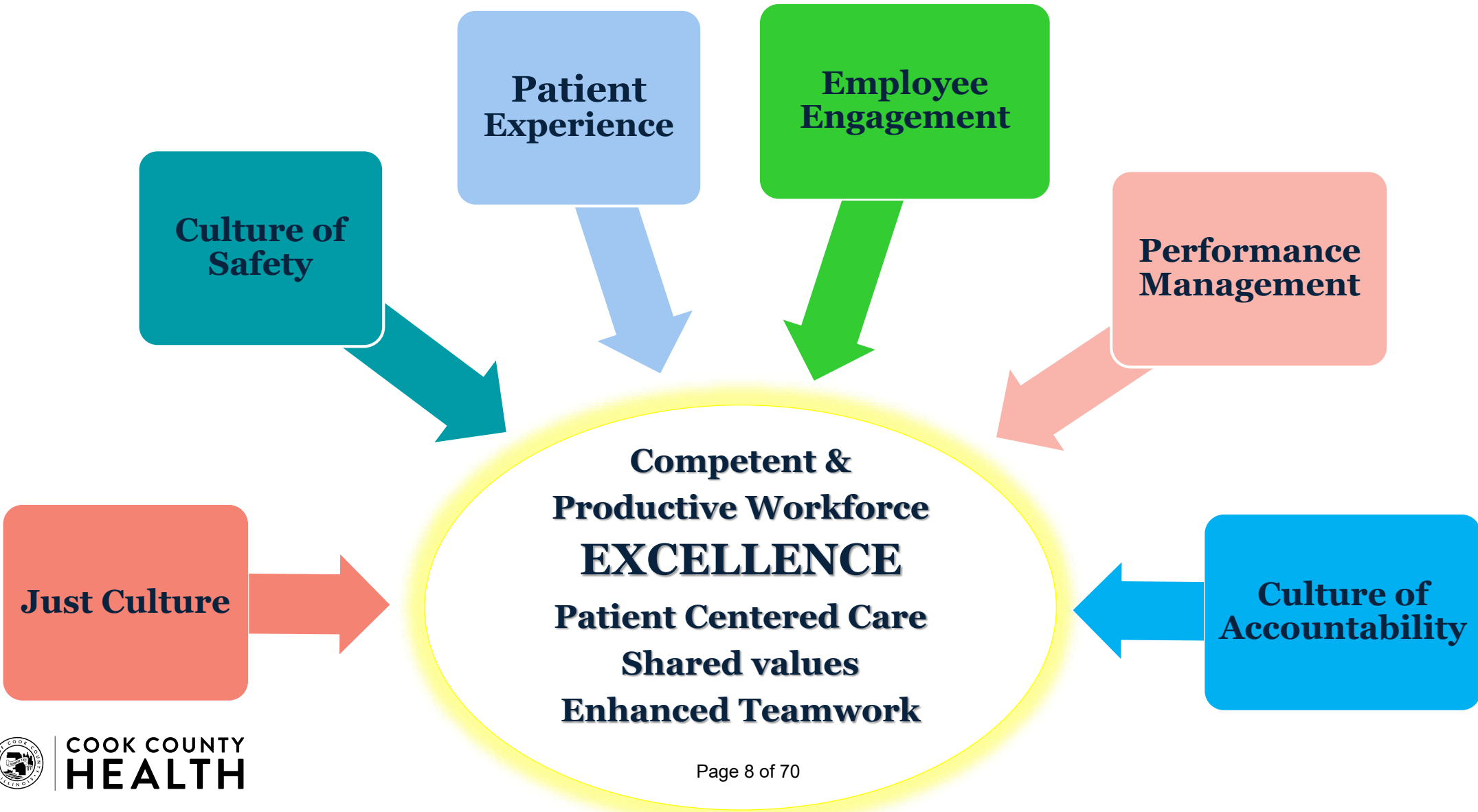


2018 Employee Engagement Survey Overview



Impact 2020

Cook County Health Strategy for Culture Change



Employee Engagement Survey

How Did We Get Here?

Where Are We Now?

Survey Administered	January 2011	October 2018
Administered:	PricewaterhouseCoopers (PwC)	Press Ganey
Methodology:	Online	Online
Survey Design:		
• Close-ended items	50	102
• Response Scale	5 Point Likert Agreement	5 Point Likert Agreement
• Open-ended question	1 Open-ended question	2 Open-ended question
Response Rate:	41%	52%
Employee Participation:	2,807*	3,094
Employee Engagement Score:	3.92	3.80
Overall Agree Score:	54% (below target)	-
Intent to Stay:	87% (above target)	-
Nat'l HC Avg. Percentile	-	5th
Natl Safety Net Hospital Avg. Percentile	-	9th

2018 Press Ganey Results

Highest Performing Items vs. Natl HC Avg.

				Difference from:	
Item	Domain	2018 CCHHS	% Unfav	Natl HC Avg	Natl Safety Net Hosp. Avg
19. I am satisfied with my benefits .	ORG	3.87	10%	+.17	+.29

2018 Press Ganey Results

Lowest Performing Items vs. Natl HC Avg.

				Difference from:	
<u>Item</u>	<u>Domain</u>	<u>2018 CCHHS</u>	<u>% Unfav</u>	<u>Natl HC Avg</u>	<u>Natl Safety Net Hosp. Avg</u>
41. This organization provides career development opportunities.	ORG	3.09	32%	-.72	-.69
45. I get the tools and resources I need to provide the best care/service for our clients/patients.	ORG	3.28	26%	-.68	-.58
29. This organization treats employees with respect .	ORG	3.32	22%	-.64	-.51
26. This organization makes employees in my work unit want to go above and beyond .	EMP	3.00	35%	-.61	-.46
12. There is a climate of trust within my work unit.	EMP	3.27	27%	-.57	-.45



2018 Open -Ended Question Results

Q1: Three suggestions to improve the hospital/ your job?

(431 responses)

1. Open lines of communication (15% of comments)

- Increased transparency between management and staff.
- Transparency in communication with senior management.
- More communication and action from management on how to help our community.
- Provide adequate information to staff regarding department objectives.

2. Provide opportunities for learning & career development (12%)

- Continuing education for nurses.
- Learning opportunities.
- Better training.

3. Respect/listen to / recognize employees (10%)

- Respect from upper management.
- Listen to what others have to say.
- Involve staff in decision making.
- I would like senior management to ask for direct input from frontline employees when considering workflow changes.

Q2: I am encouraged/excited about...

(375 responses)

1. My job (15% of comments)

- My job.
- My work.
- Being in the position that I am in.
- Getting to work to make a difference.

2. Quality patient care and services (15%)

- Client satisfaction.
- I treat each patient as if they were a member of my own family.
- Making sure the patient comes first.
- Care integration and quality.

3. Upcoming changes & future plans (14%)

- Changes to come.
- Forthcoming changes.
- All the changes at CCHHS.

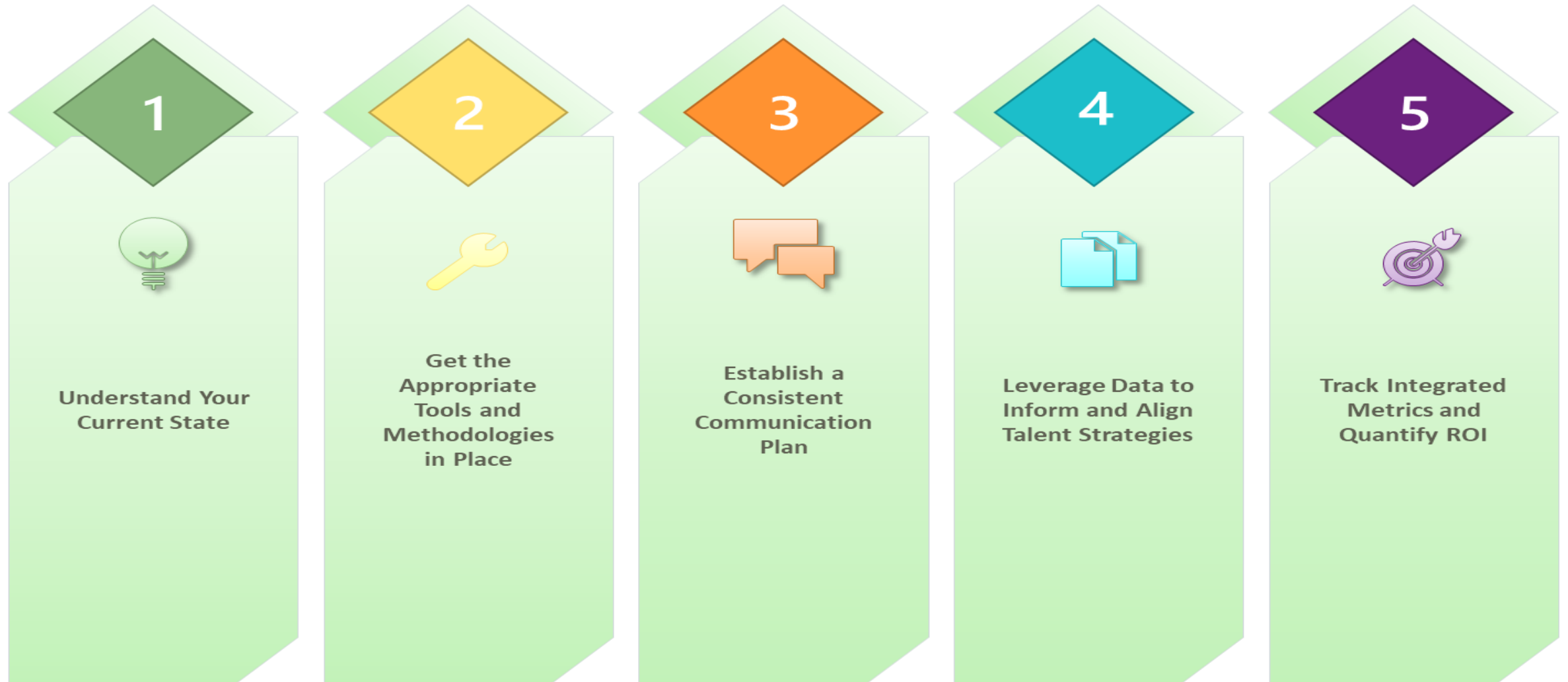




Next Steps



5 Steps to Drive an Engagement Strategy



Operationalized Action Plan

3 Key Survey Themes:

IDENTIFY SURVEY THEME

CONSISTENCY IS

Communication

Training Opportunities

2019 Cook County Health Training Catalog

Human Resources Department
Organizational Development &
Training Team

 COOK COUNTY
HEALTH COOK COUNTY
HEALTH

Employee Recognition

Implement

Prepare



Engage

Evaluate

FEEDBACK



IMPLEMENT & EVALUATE



**COOK COUNTY
HEALTH**

ENGAGEMENT COMMITTEE

Page 15 of

Beena Peters - Chief Nursing Officer
Barbara Pryor – Chief Human Resources Officer
Dr. Ron Wyatt – Chief Quality Officer

Metrics



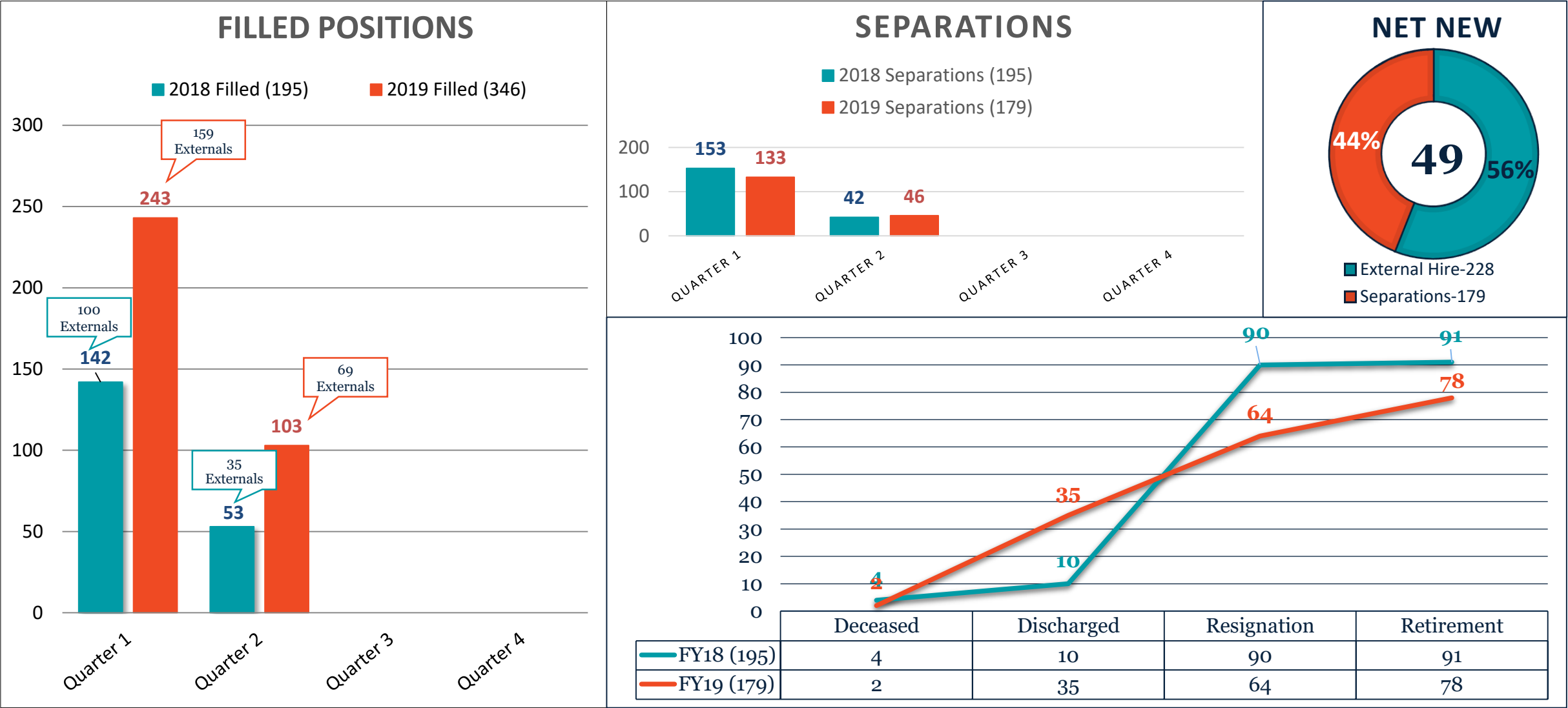
HR Performance Data

FY19 Position Status	Count
Fiscal Year 2019 Approved Positions:	7,265
Vacant Positions:	1,205
# of Positions in Process:	849



CCH HR Activity Report

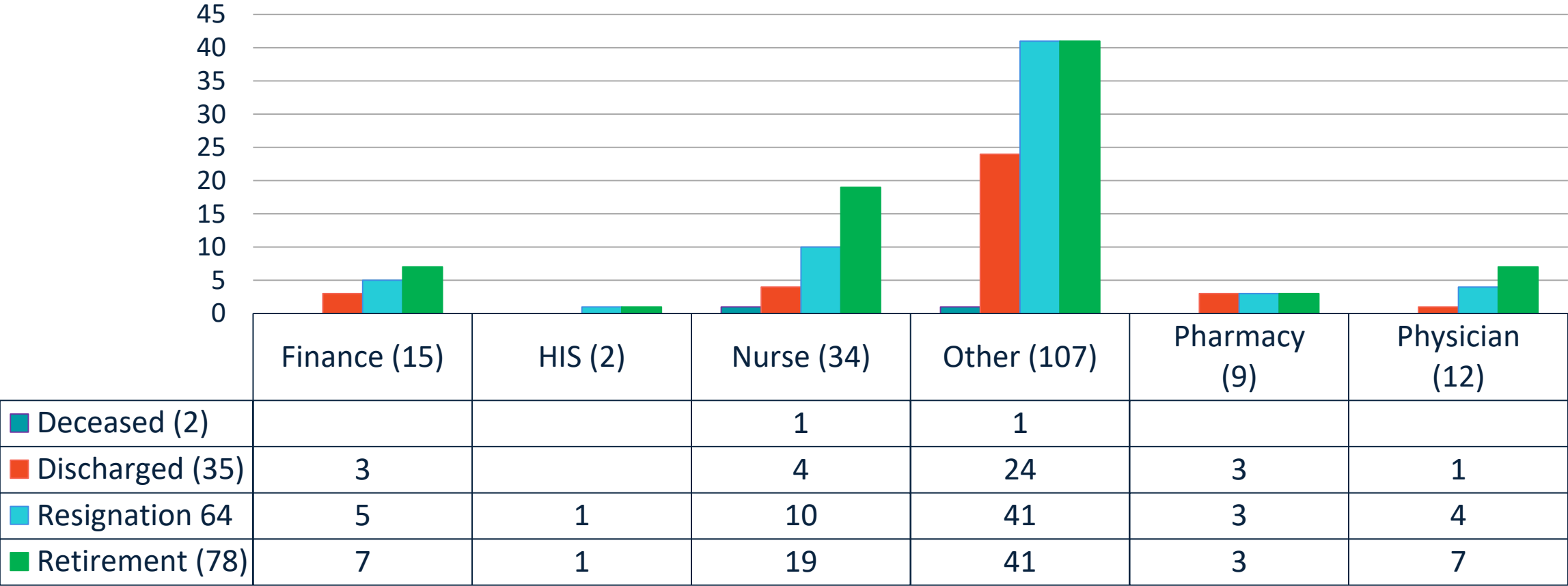
Thru 03/31/2019



CCH HR Activity Report

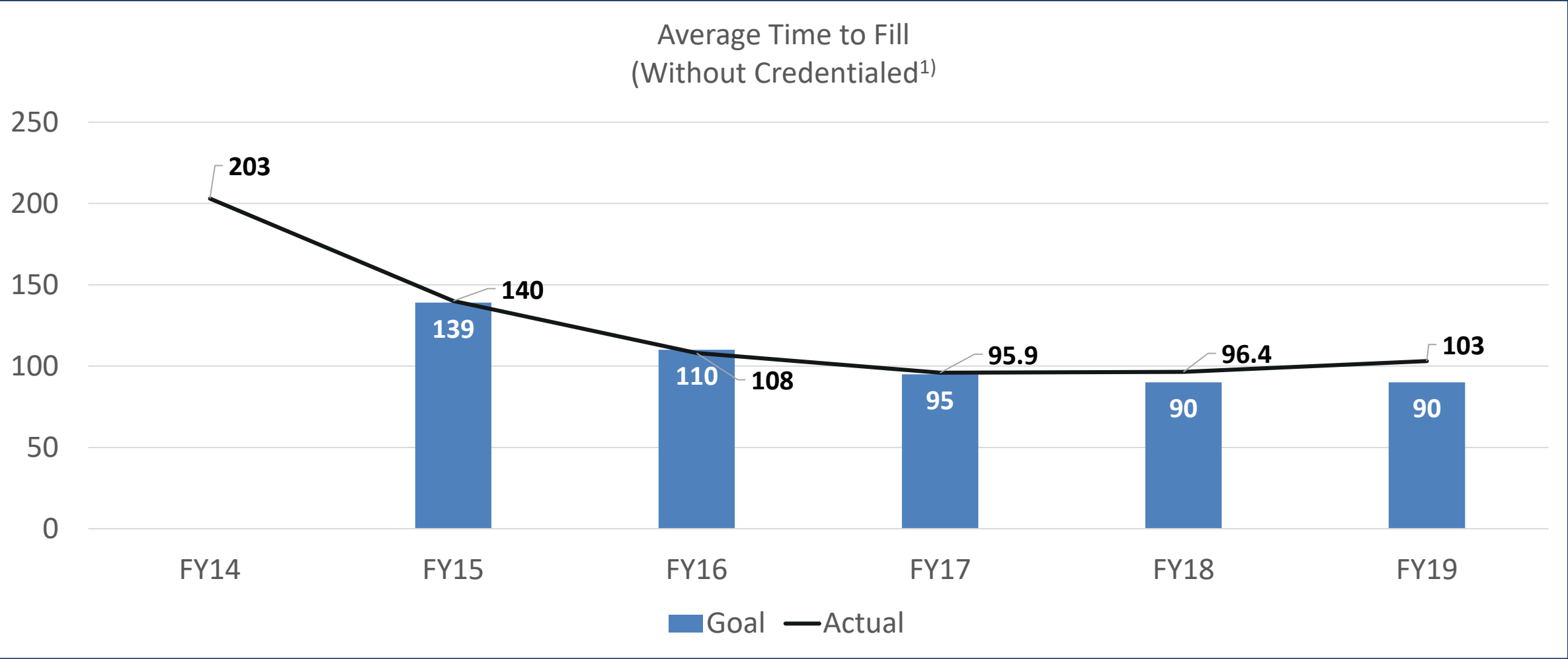
Thru 03/31/2019

SEPARATIONS BY CLASSIFICATION - 179



CCH HR Activity Report – Open Vacancies

Improve/Reduce Average Time to Hire*



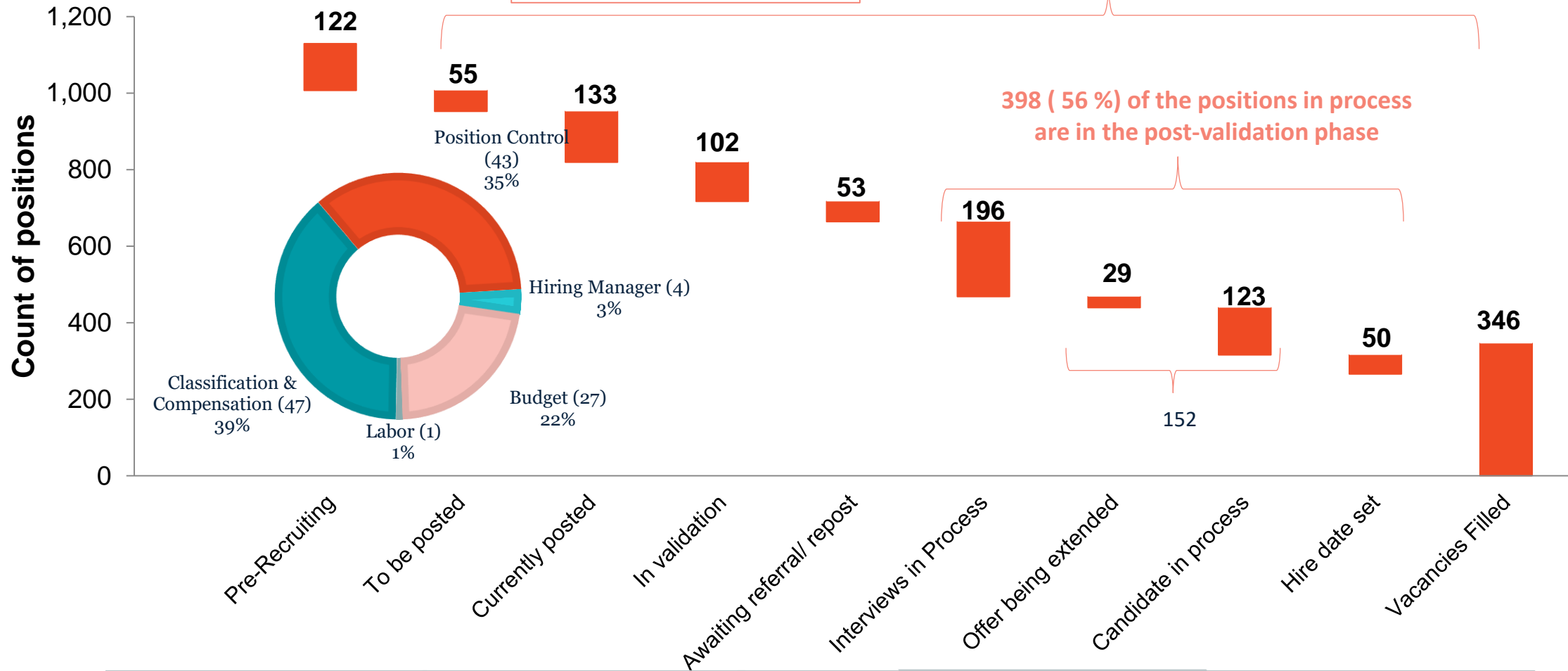
¹Credentialed Positions: Physicians, Psychologists, Physician Assistant I and Advanced Practice Nurses.

CCH HR Activity Report – Hiring Snapshot

Thru 03/31/2019

Clinical Positions – 503 / 69%
Non-Clinical Positions – 224 / 31%

727 Positions in Recruitment



Shared Responsibility

Human Resources

Management

Human Resources

Shared Responsibility



COOK COUNTY
HEALTH

Budget / Position Control 122 + Recruitment 727 = 849 Positions in Process

Page 21 of 70

Thank you.



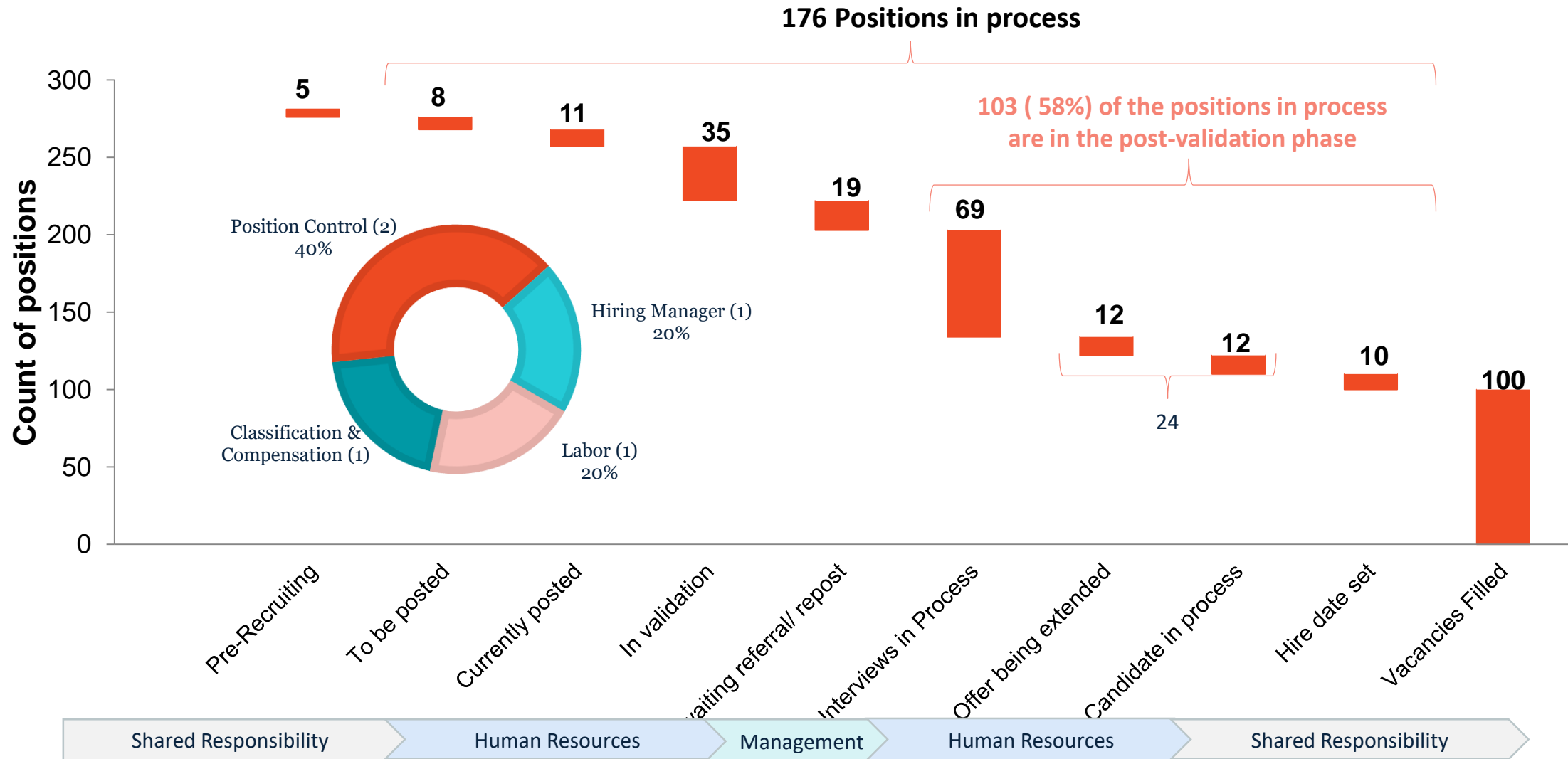
Appendix



COOK COUNTY
HEALTH

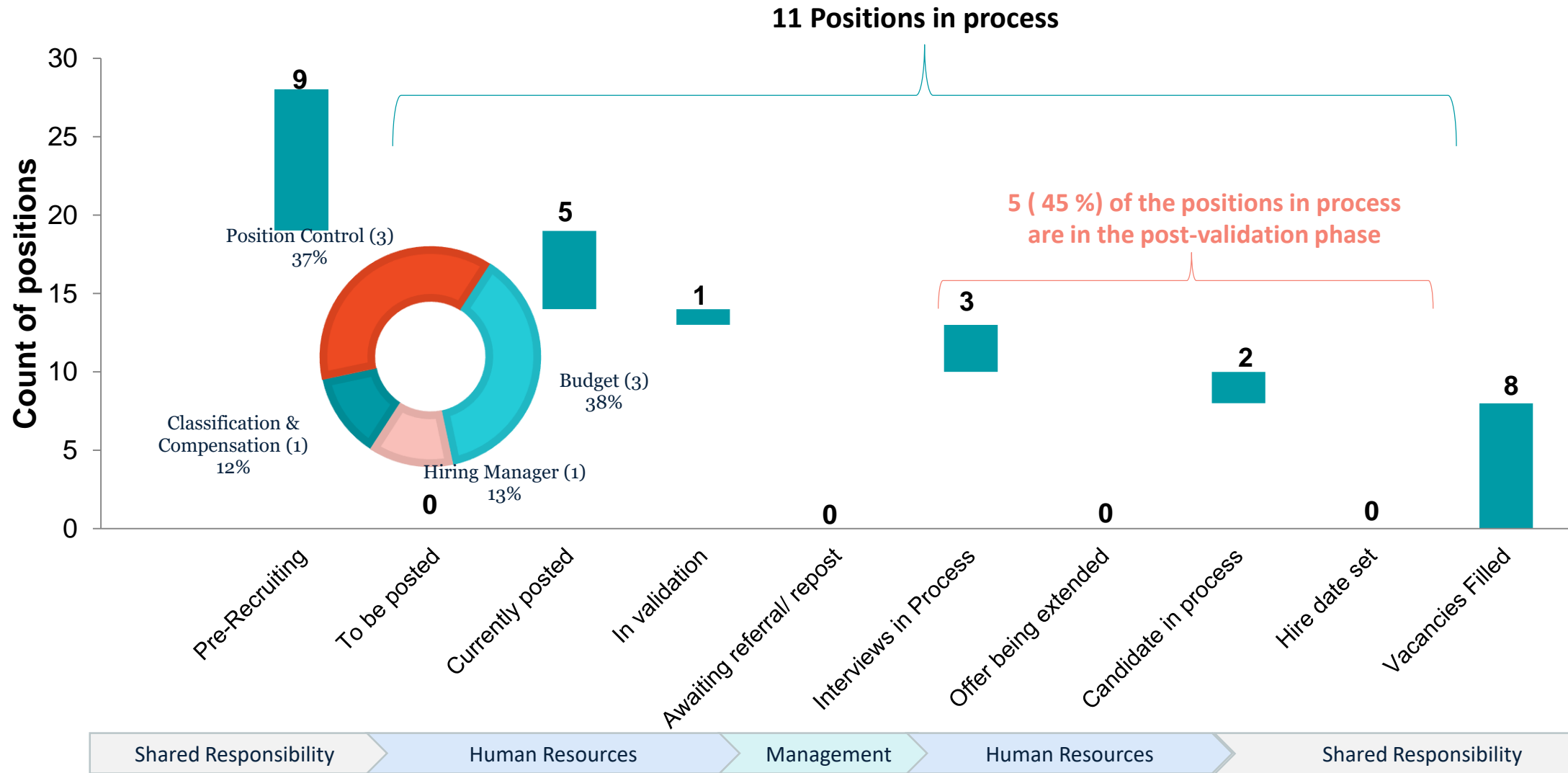
CCH HR Activity Report – Nursing Hiring Snapshot

Thru 03/31/2019



CCH HR Activity Report – Finance Hiring Snapshot

Thru 3/31/ 2019



Cook County Health and Hospitals System
Human Resources Committee Meeting
Tuesday, April 16, 2019

ATTACHMENT #2

Strategic Planning FY 2020-2022



Nursing Services

Beena Peters, DNP, RN, FACHE

Chief Nursing Officer

April 16, 2019

Page 27 of 70



**COOK COUNTY
HEALTH**



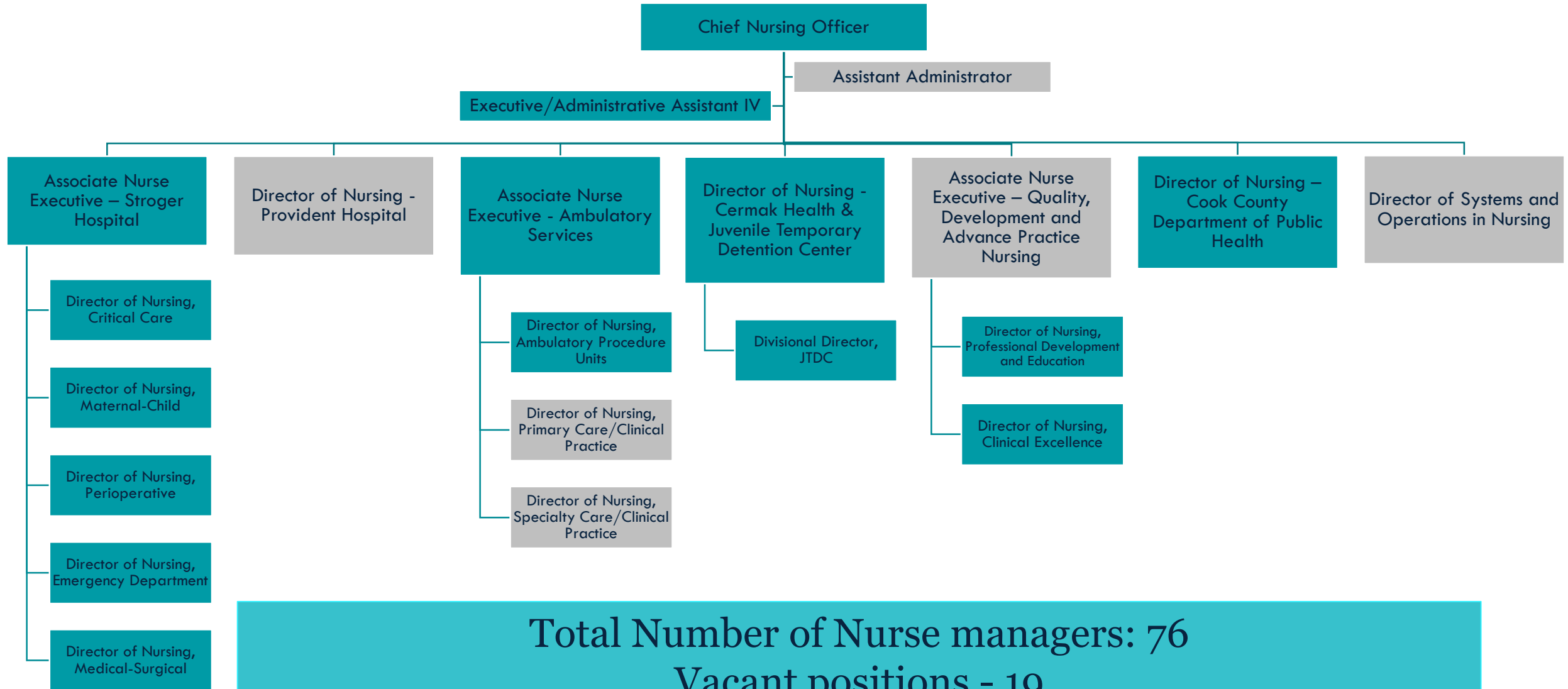
Nursing Mission Statement

***Building a high quality, patient-centered
and integrated health system that
maximizes resources to ensure the
greatest benefit for the patients and
communities we serve.***





Nursing Organizational Chart



Total Number of Nurse managers: 76
Vacant positions - 19

Overview of Department

Position	FY 19 budgeted FTEs	Filled positons	Vacancy	Vacancy Rate
RNs	1073	901	172	16%
Other	655	548	107	16%
Total	1728	1449	279	16%

Other :

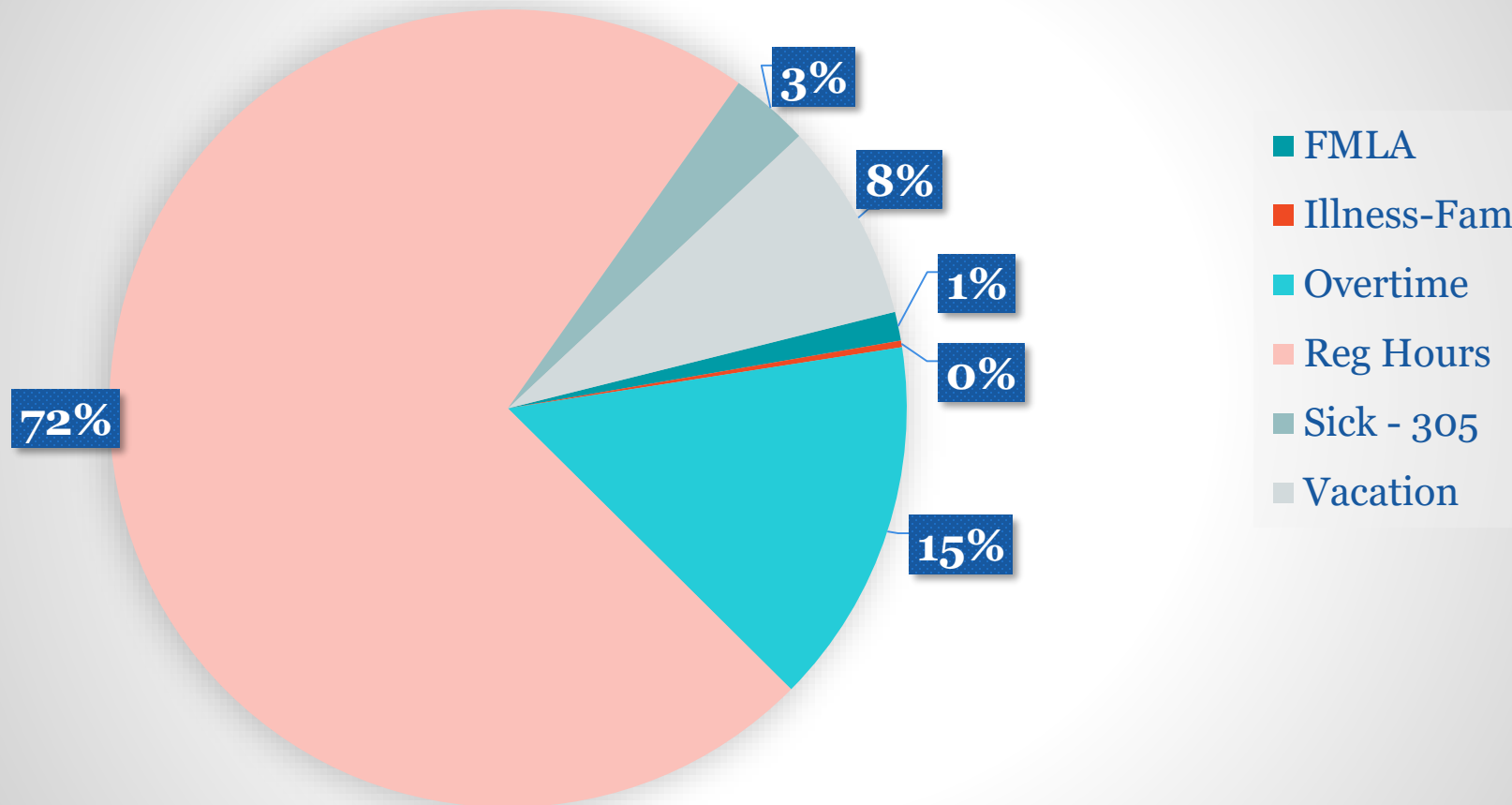
- Administrative Analysts
- Service Coordinator
- Dialysis Technician
- Operating Room Technician
- Emergency Respiratory Technician
- Emergency Room Technician
- Administrative Assistants
- Ward Clerk
- Correctional Medical Tech
- Electrocardiogram Technician
- Attendant Patient Care
- Medical Assistant
- Licensed Practical Nurse
- Sterile Processing Technician
- Telemetry Monitor Technician
- Health Advocates

Workforce Data

Paid Hours by Type (including overtime)

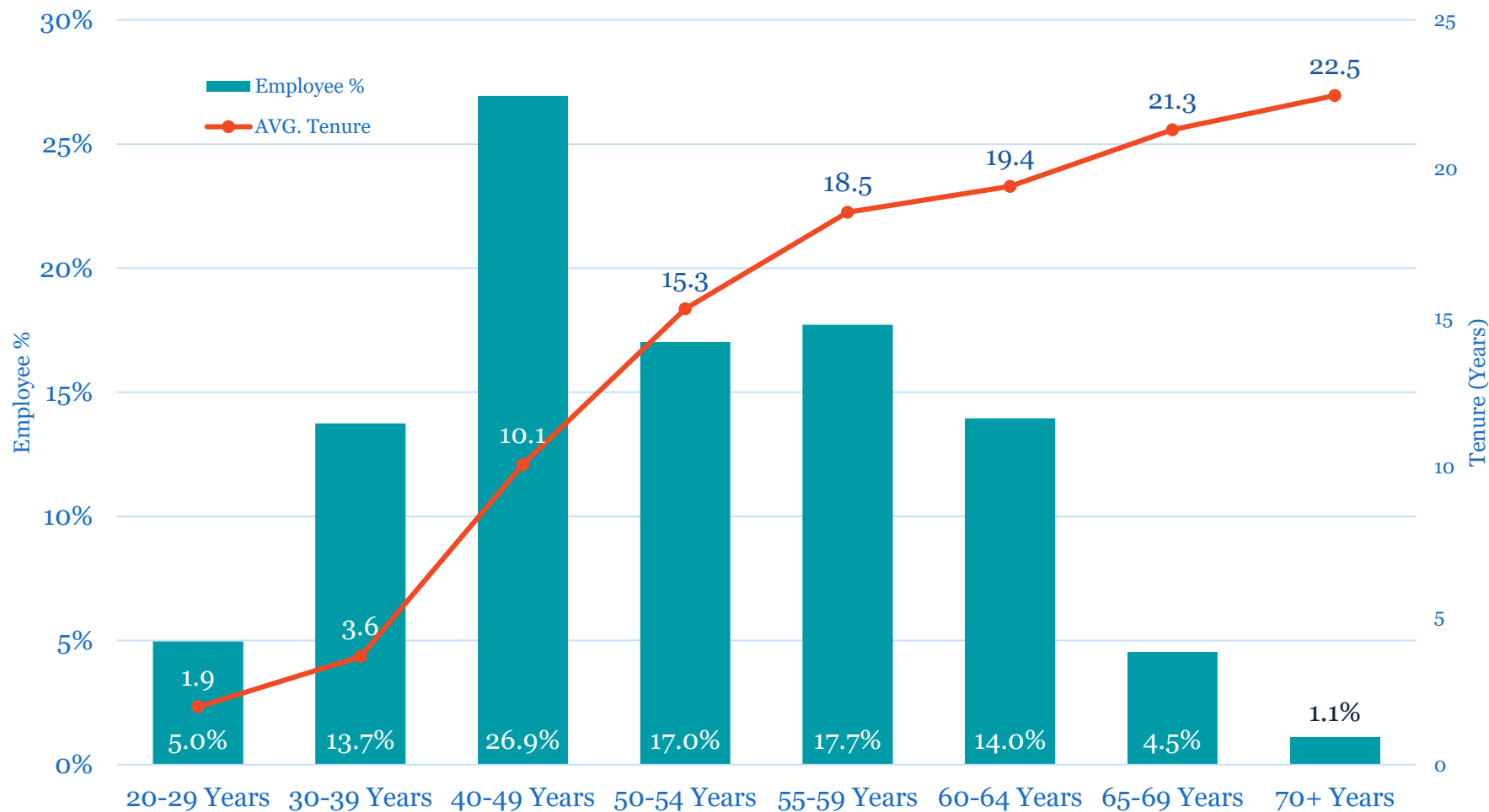
FY 18 OT Hours	FY 18 OT Amount
356,115	\$23,447,576

FY18 Nursing Pay Type Distribution



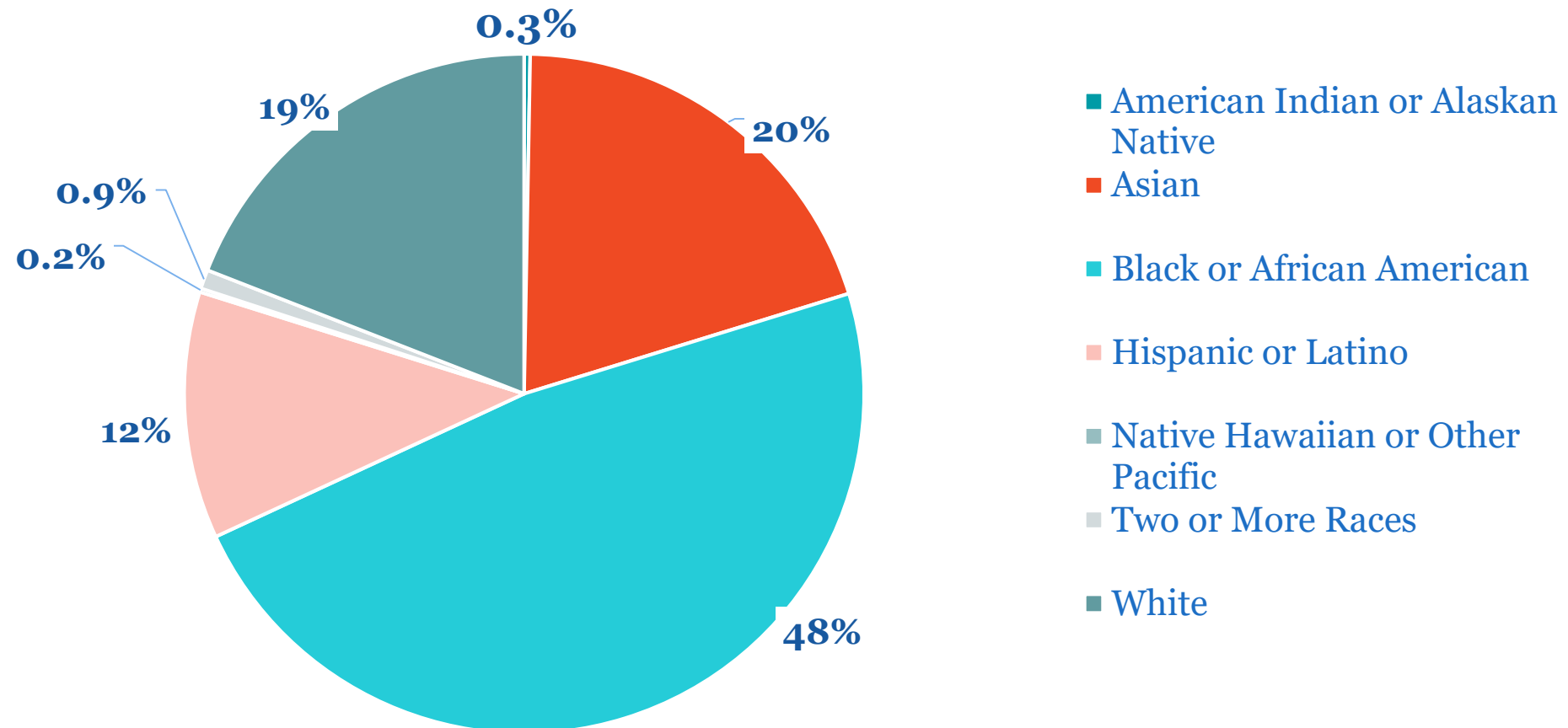
Workforce data

Employee Age Distribution and Average Tenure



Workforce Data

Nursing Staff – Race and Ethnicity Distribution



Impact 2020 Recap



Status and Results

- **Deliver High Quality Care**
- **Grow to Serve and Compete**
- **Foster Fiscal Stewardship**
- **Invest in Resources**
- **Leverage Valuable Assets**
- **Impact Social Determinants**
- **Advocate for Patients**



COOK COUNTY
HEALTH

Impact 2020

Progress & Updates

Focus Area	Name	Status
Deliver High Quality Care	Catheter Associated Urinary Track Infection prevention bundle	Complete
Deliver High Quality Care	Central Line Associated Blood Stream Infection prevention nursing initiatives	In Progress
Deliver High Quality Care	Measure Patient Perception of Cultural Competence	In Progress
Foster Fiscal Stewardship	Clairvia Staffing implementation	Complete
Deliver High Quality Care	Bedside shift reporting and leadership rounding	Ongoing

Impact 2020

Progress & Updates

Focus Area	Name	Status
Deliver High Quality Care	Leverage Clairvia for management reporting and standardize accountability	To be started
Deliver High Quality Care	Evaluate effectiveness of electronic scheduling through time saved for managers, schedulers and end users.	To be started
Deliver High Quality Care	Literature search of Professional Practice Models, Nurse Theorists, and best practices of adoption	To be started

Impact 2020

Progress & Updates

Focus Area	Name	Status
Deliver High Quality Care	Improve patient satisfaction and nurse sensitive quality measures year-over-year. Including falls, pressure ulcers, infections, restraints, IV infiltrations, etc.	In progress
Deliver High Quality Care	Create benchmarks for nurse sensitive measures based on the National Database of Nursing Quality Indicators	In progress
Deliver High Quality Care	Institute the required foundational elements of the American Nurses Credentialing Center Magnet program and improve outcomes.	To be started
Deliver High Quality Care	Develop a System-wide professional practice model	To be started

National Database for Nurse Quality Indicators

Nursing Sensitive Clinical Indicators

Quality Indicators	CCH 8 Quarter Average	NDNQI Mean	
Nursing Hours Per patient	10.15	10.40	
RN Hours Per Patient Day	8.04	7.67	★
Total Patient Falls Per 1,000 Patient Days	2.24	2.57	★
Injury Falls Per 1,000 Patient Days	.51	.51`	★

National Database for Nurse Quality Indicators

Nursing Sensitive Clinical Indicators

Quality Indicators	CCH 8 Quarter Average	NDNQI Mean	
Percent of Patient Falls that were of Moderate or Greater Injury Severity	1.11	2.89	★
Percent of Surveyed Patients with Hospital Acquired Pressure Injuries	2.76	.81	
Percent of Surveyed Patients with Hospital Acquired Pressure Injuries Stage 2 and above	2.38	1.43	
Percent of Peripheral IV Sites with Infiltrations	1.43	.88	

Above Mean

At or below Mean-


Below the mean is better



COOK COUNTY
HEALTH

National Database for Nurse Quality Indicators

Nursing Sensitive Clinical Indicators

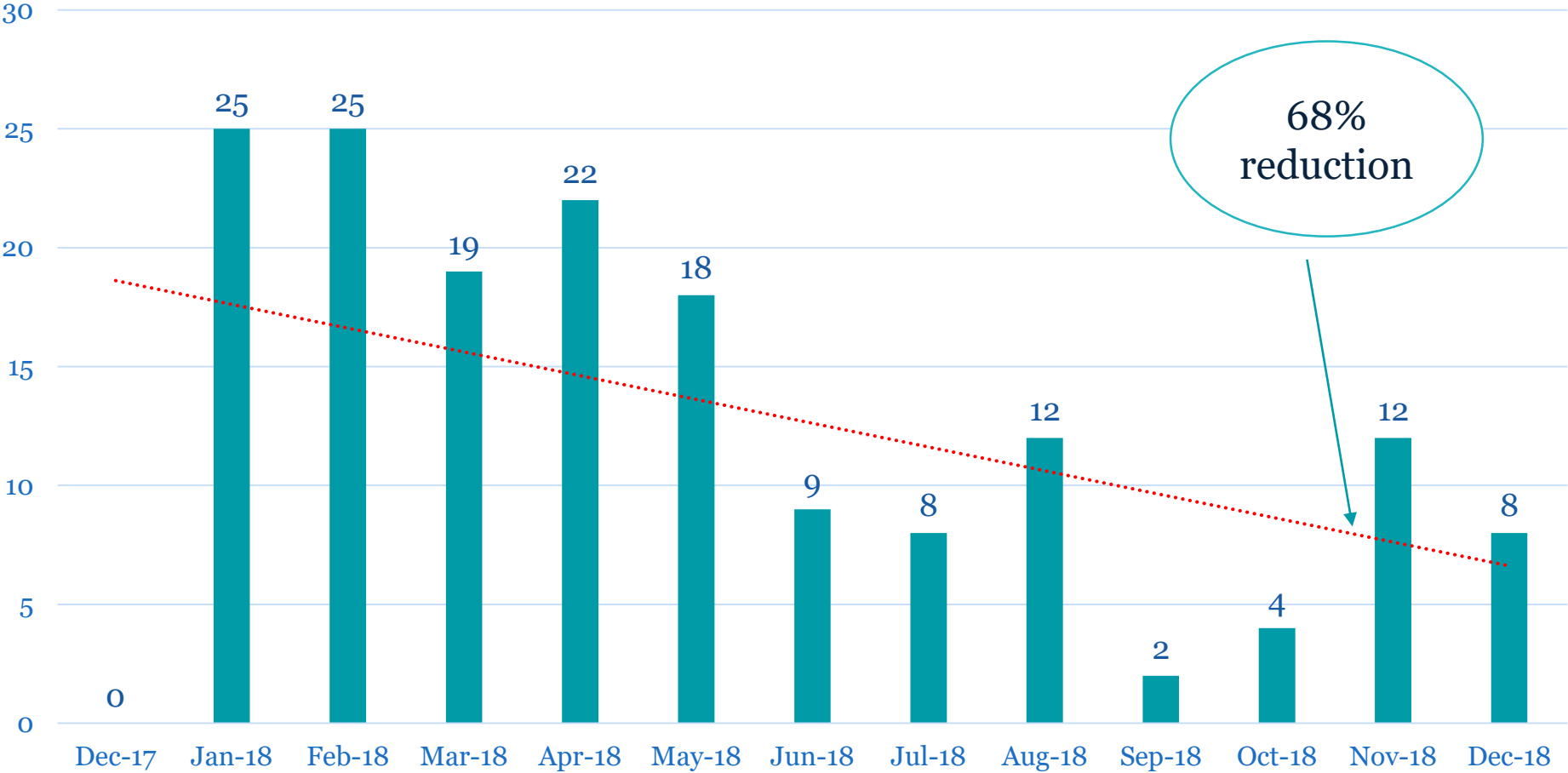
Quality Indicators	CCH 8 Quarter Average	NDNQI Mean	
Percent of Patients with Physical Restraints (Limb and/or Vest)	3.56	1.96	
Central Line Associated Blood Stream Infections per 1000 Central Line Days	.79	.75	
Ventilator-Associated Events per 1000 Ventilator Days	9.17	5.79	
Catheter Associated Urinary Tract Infections per 1000 Catheter Days	1.08	1.09	

At or above Mean

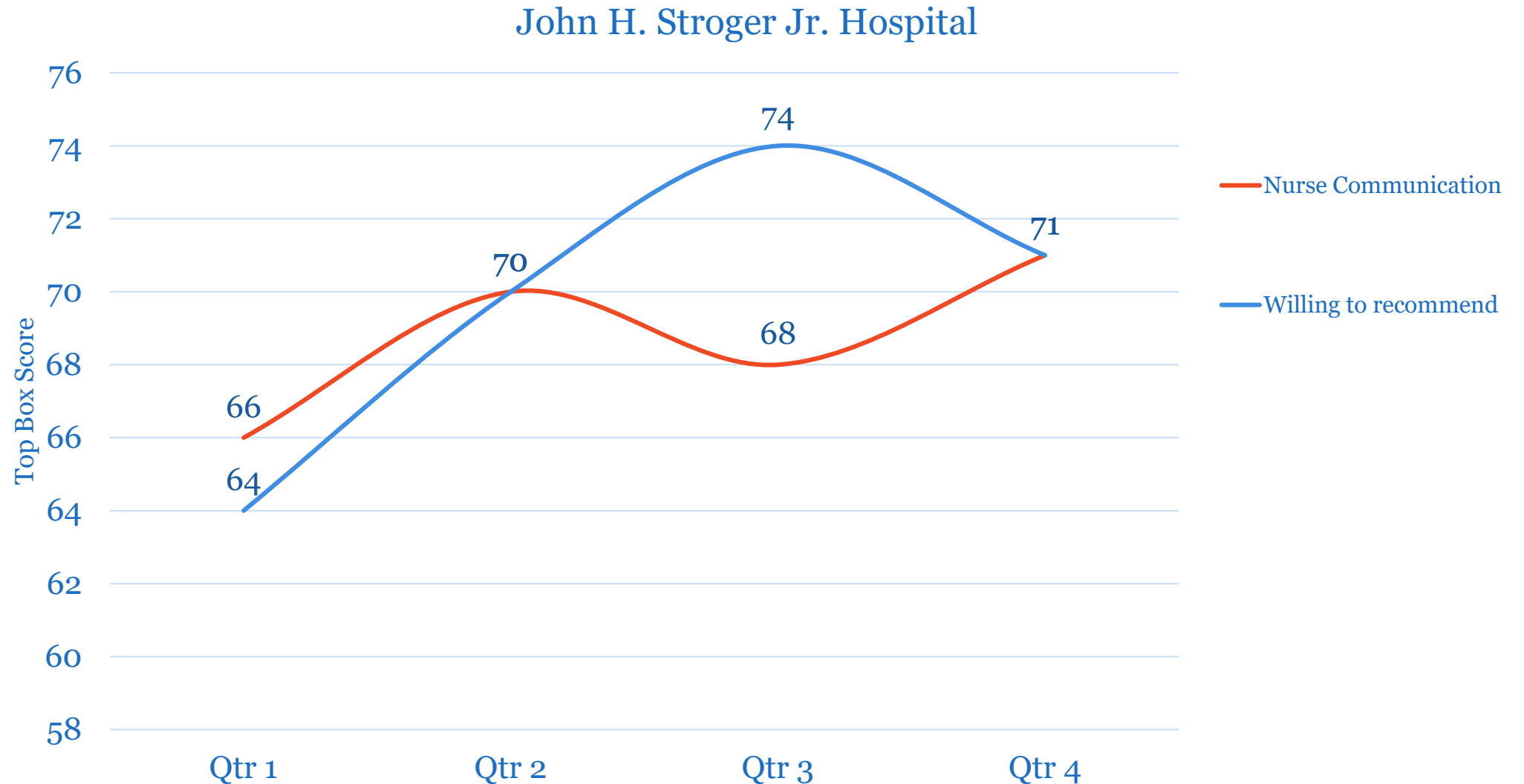
Below mean is better

Intensive Care Data

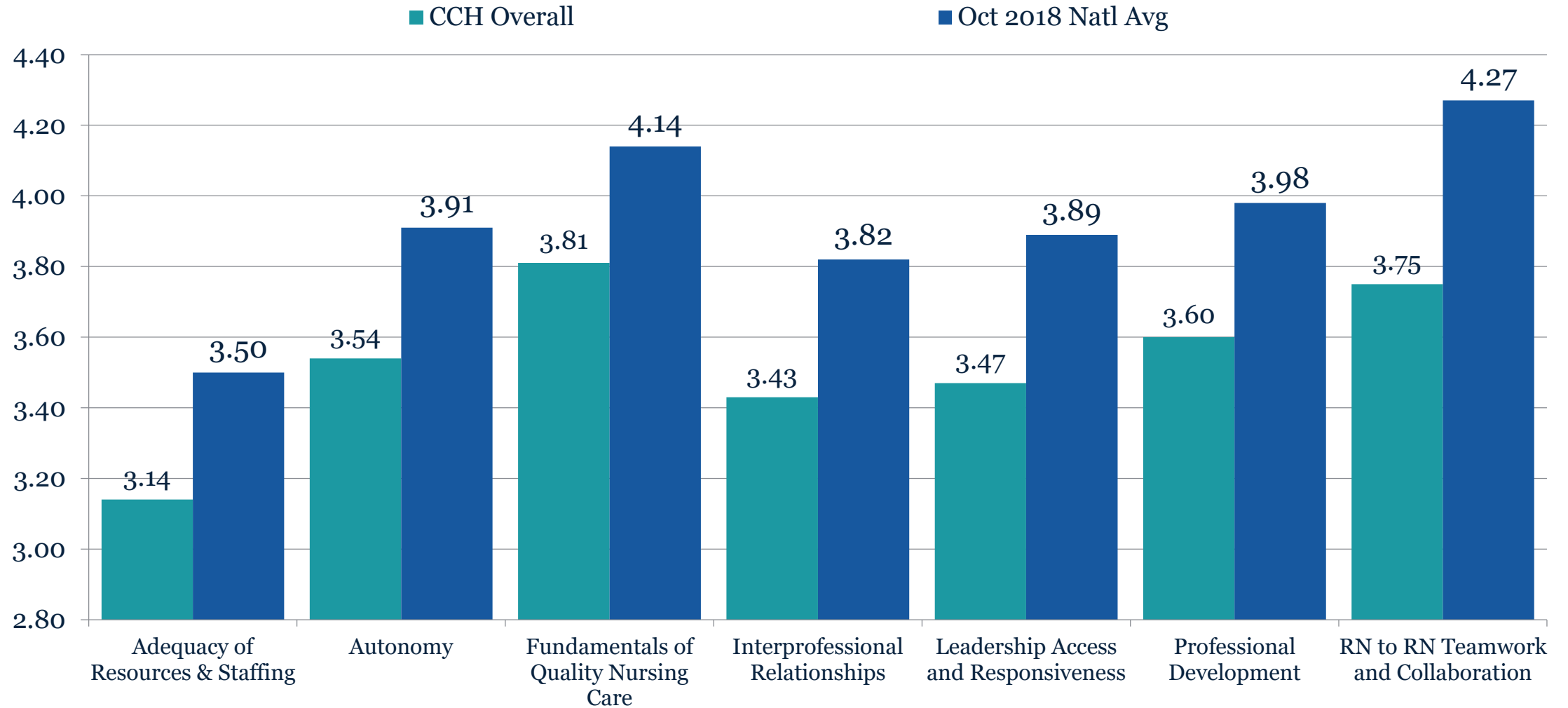
Intensive Care
Hospital Acquired Pressure Injuries by Month
Data from 12/2017 to 12/2018



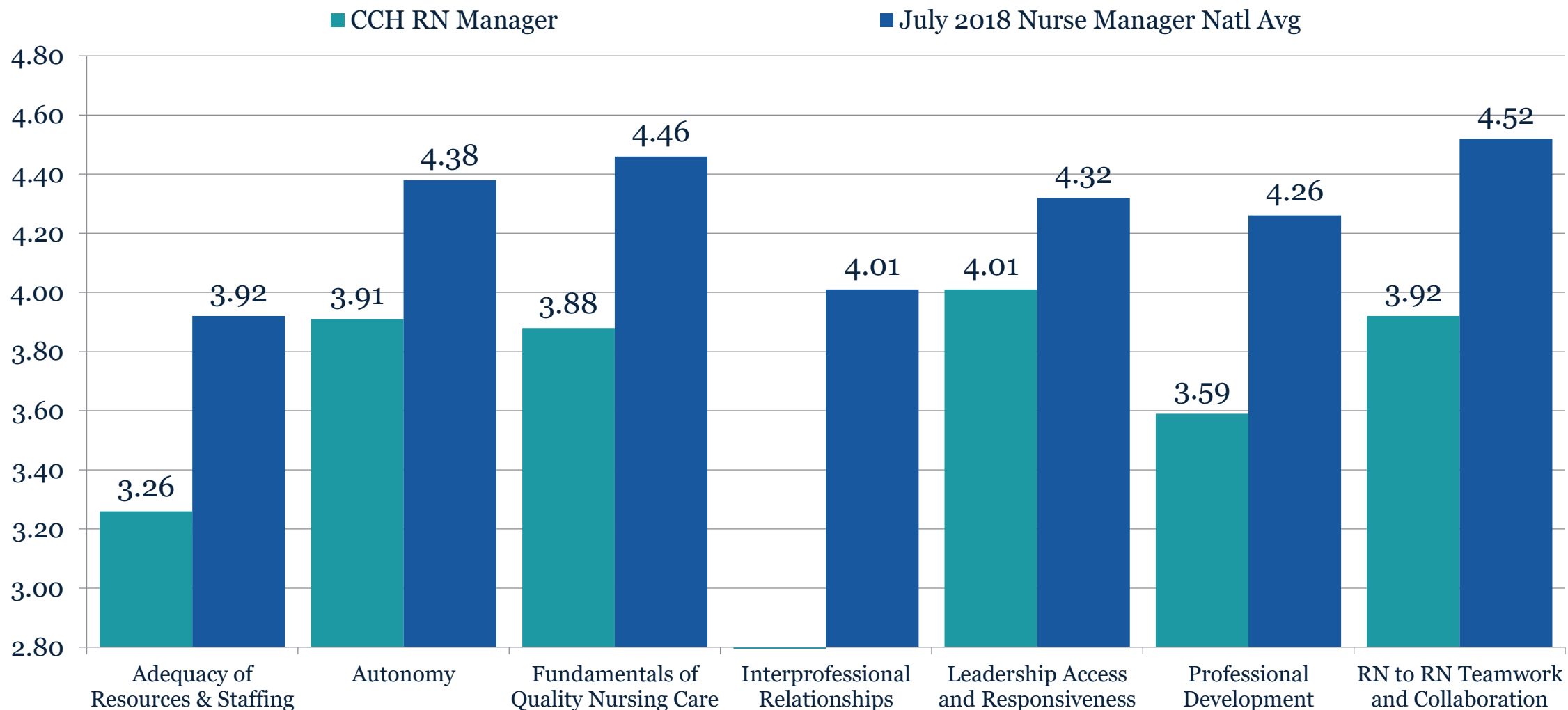
Patient Satisfaction 2018



Nurse Excellence Results - Employee Engagement



Nurse Leaders Excellence Results- Employee Engagement





FY2020-2022

The Future:

Environmental Scan of Market, Best Practices and Trends



COOK COUNTY
HEALTH

Environmental Scan of Market, Best Practices and Trends

IOM Guiding Principles for Healthcare Operation

The IOM report on Crossing the Quality Chasm; “A New Health System for 21st Century” calls for fundamental changes in the US Healthcare Systems in order to improve quality and decrease the health care cost



Environmental Scan of Market, Best Practices and Trends

Institute of Medicine – Future of Nursing Recommendation

- Nurses should achieve higher levels of education through an improved education system that promotes seamless academic progression
- With higher levels of training, nurses should practice to the full extent of their education and training
- Nurses should be full partners with physicians and other health care professionals in redesigning Health Care in the United States.
- Effective workforce planning and policy making requires better data collection and an improved Information Technology infrastructure
- Removing organization barriers will create an inter-professional practice culture
- Reorganize the third party payment structure
- Require insurers to include Advanced Practice Nurses to reimbursement

Environmental Scan of Market, Best Practices and Trends

Expand Opportunity For Nurses to Lead and Diffuse Collaboration

Improvement Efforts

- Remove Practice Barriers
- Innovations for better patient care outcomes at lower costs
- Opportunities for nurses to lead and manage collaborative efforts
- Inter-professional partnerships for broad perspectives, including nursing
- A collaborative effort for research to integrate the best available evidence to guide nursing practice
- Proactive RN recruitment to address workforce shortage

Environmental Scan of Market, Best Practices and Trends

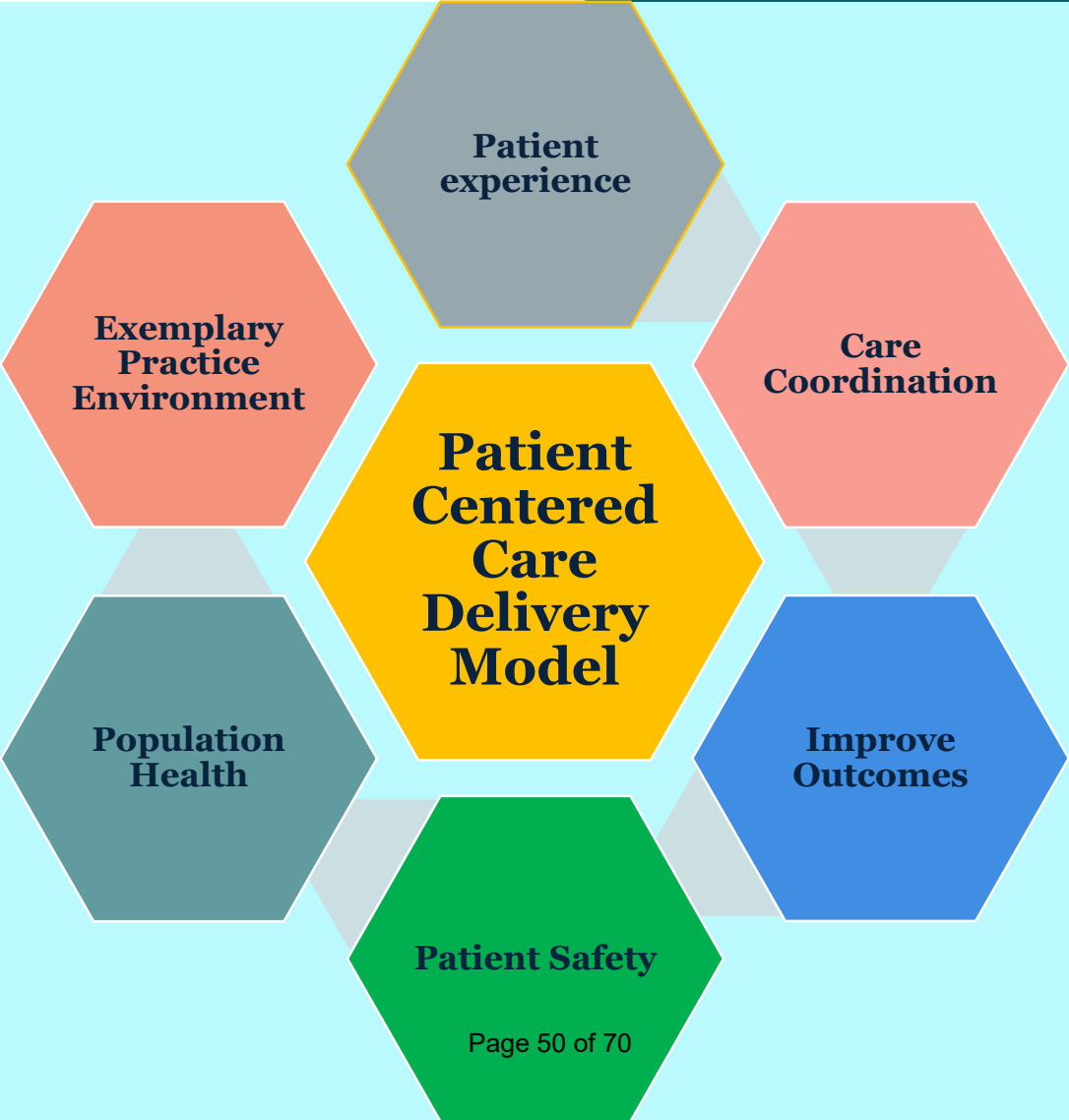
IOM - Future of Nursing Recommendation

- Implement Nurse Residency Program
- Increase Nurses with BSN by 80% by 2020
- Double the number of nurses with a doctorate by 2020- Support Nursing academic goals /practice
- Ensure that nurses engage in lifelong learning
- Prepare and enable nurses to lead change to advance health
 - Decision makers from both the public and private sectors should ensure that leadership positions are available to be filled by nurses
- Build an infrastructure for the collection and analysis of workforce data
 - Inability to project the workforce need based on aging baby boomers and healthcare reform

Environmental Scan of Market, Best Practices and Trends

Patient Centered Care Delivery Model

ACHIEVING THE TRIPLE AIM:
Improving the health of the population and the patients' experience while simultaneously reducing the cost of care.



SWOT Analysis

Strengths

- Low staffing turnover
- Strong Commitment to Mission
- Diverse workforce
- Educated workforce
- New nursing leadership
- Employment benefit

Weaknesses

- Infrastructure & data for workforce
- Productivity and efficiency metrics
- Lack of clear goals and accountability metrics
- Complex hiring process
- Inability to hire part time staff to manage variable workload
- Patient experience score & external rating
- Nursing Quality infrastructure
- Low employee engagement score

Opportunities

- System Revenue optimization and cost saving initiatives with OR services
- Nursing operation & quality decision system
- Workforce engagement and efficiency
- Top-of-license Nursing practice
- Maternal Child Health program & Preterm prevention initiatives
- Grant – workforce development
- Nursing leadership structure
- Labor union relationship

Threats

- Nation's aging population
- Aging Nursing workforce
- Workforce shortage
- Staff burnout and workplace violence
- Staffing mandates by legislation
- Shortage of bedside nurses
- High cost delivery model
- Fragmentation of care
- Nursing Leadership salary structure
- National shortage of bedside nurses



FY 2020-2022

Objectives



Deliver High Quality Care FY 2020-2022 Strategic Planning Recommendations

Objectives

Pursue Magnet status and adopt related standard metrics

- Improve nurse-sensitive quality outcomes
- Develop a professional practice model and implement evidence based practice
- Establish a shared governance structure
- Improve patient experience
- Foster a culture of safety and healthy work environment to practice high-reliability
- Develop strategic partnerships/collaborations with the professional nursing community (agencies, nursing colleges, etc.)
- Standardization of quality metrics (Key Performance Indicator and Leadership dashboards, etc.)
- Workforce planning and development



Deliver High Quality Care FY 2020-2022 Strategic Planning Recommendations

Highlighted Tactics

Leverage information technology initiatives

- Develop a system to optimize nurse staffing effectiveness to improve quality
- Flex staffing to Demand using predictive staffing model
- Establish Nurse Staffing budget structure and productivity model
- Variable workload staffing model
- Establish Nursing operational information systems and Innovate on staffing model
- Create Nursing Informatics Structure – Optimize nursing efficiency and effectiveness

Grow to Serve and Compete FY 2020-2022 Strategic Planning Recommendations

Objectives

- Increase service line volumes for Surgery and Maternal-Child Services
- Expand ER services and reinstitute intensive care services at Provident Hospital
- Increase Geriatric program competency
- Improve ED Workflow at Stroger and Provident Hospitals to decrease Left Without Seen
- Optimize Maternal-Child growth & quality of care

Highlighted Tactics

- Establish an integrated service line model to grow volume
- Develop a program to address the growth of geriatrics and RN competencies

Foster Fiscal Stewardship FY 2020-2022 Strategic Planning Recommendations

Objectives

- Establish nursing productivity structure/system
- Streamline the RN hiring process
- Establish bi-weekly workforce data & financial reports
- Establish nursing budget process
- Decrease operational cost (OT and Agency Costs)
- Establish a Value Analysis Committee for Nursing
- Streamline Scope management process
- Throughput Discharge efficiency and manage observation
- Length of Stay
- Decrease readmissions through patient education initiatives

Highlighted Tactics

- Optimize patient care service staffing model to decrease overtime and agency costs
- Optimize the use of Clairvia to manage productivity
- Develop nurse productivity reports, utilize benchmarking information

Invest in Resources

FY 2020-2022 Strategic Planning Recommendations

Objectives

- Engage Magnet Consultant/workforce analyst consultant (2nd year)
- E-sitter Program
- Invest in the cost of Magnet designation
- Nursing competency program
- Nursing residency Program
- Leadership Development

Highlighted Tactics

- Workforce Development e.g. Implementing rounding tool, nurse call system.
- Improve nursing staff engagement
- Implement a Nursing Residency Program

Leverage Valuable Assets

FY 2020-2022 Strategic Planning Recommendations

Objectives

- Create an inter-professional leadership dyads model
- Engage Advisory Board for Best Practice summit (12 leaders)
- Improve collaboration with frontline staff and union leadership
- Physician/Nurse Mentoring Teams

Highlighted Tactics

- Enhance collaboration with labor
- Implement Dyad unit leadership model

Leverage Valuable Assets

FY 2020-2022 Strategic Planning Recommendations

Nursing Workforce Development

- Succession planning and leadership development
- Develop an engaged workforce
- Reduce vacancy rate to national standard
- Create Nursing Education Quality grants
- Foster top-of-license practice for APNs
- Develop Nursing Recognition Program
- Foster cultural inclusion
- Develop a comprehensive population specific educational program and competencies
- Increase BSN educated workforce
- Strengthen public health, ambulatory care, correctional health nursing

Highlighted Tactics

- Integrate Quality Goals and Practice Standards in Job Descriptions
- Nursing focus simulation lab, establish internal or partnerships

Impact Social Determinants/Advocate for Patients FY 2020-2022 Strategic Planning Recommendations

Objectives

- Lifestyle Center for Chronic Conditions at Provident Hospital
- Commit to a goal of Zero Harm
- Put patients at the center of the planning, delivery, and assessment of care

Highlighted Tactics

- Recognize and define safety, quality, and patient centricity as the primary elements of the patient experience and understand the critical interdependencies between them
- Drive change using data and transparency
- Transform culture and leadership

Measures and Metrics

Nursing Dashboard Metrics

Nursing Quality Metrics

- HAPI
- Fall
- CLABSI
- HCAHPS Measures
- (NDNQI metrics)

Operational Metrics

- Overtime
- Agency Usage
- Vacancy rate
- Productivity

Staff Engagement Metrics

- Communication
- Teamwork
- RN turnover rate

Timeline

2020

- Structure- staffing and efficiency
- Data and Key Performance Indicators (KPI)
- Education and training
- Teambuilding
- Shared leadership structure
- Frontline staff engagement
- Leadership Development

2021

- Magnet designation process
- Hardwire excellence
- Optimize cost of care and quality outcome
- Change culture
- Top of the license Practice
- Inter-professional Practice Model

2022

- Continue Magnet efforts
- Achieve excellence in quality of care frontline staff engagement
- Nursing Research Center
- Magnet Application Process



Thank you.



COOK COUNTY
HEALTH

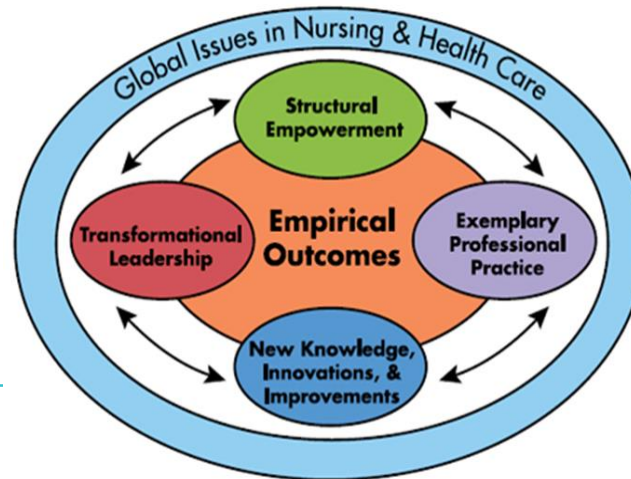
Appendix



Our Journey To Magnet

The Magnet Recognition Program® recognizes healthcare organizations for quality patient care, nursing excellence and exemplary professional nursing practices. The Magnet Recognition Program® provides a roadmap to advance nursing excellence with frontline nurses at its core

The program requires healthcare organizations to meet eligibility requirements and address standards within five major components that comprise the Magnet Model (below). The model guides the Magnet principles that focus healthcare organizations on achieving superior performance as evidence by outcomes.



Magnet Model Components

Model Component	Forces of Magnetism
Transformational Leadership	Quality of Nursing Leadership Management Style (Use of Emotional Intelligence)
Structural Empowerment	Organizational Structure Image of Nursing Professional Development Community and Organizational Involvement
Exemplary Professional Practice	Professional Model of Care Interdisciplinary Collaboration Autonomy Consultation and Resources Nurse as Teacher
New Knowledge, Innovation and Improvements	Quality Improvement
Empirical Quality Results	Quality of Care

Magnet Designation Benefits

System/Staff

- Lower nurse dissatisfaction and nurse burnout
- Higher nurse job satisfaction
- Lower registered nurse (RN) turnover
- Business growth and financial success

Patients

- Higher adoption of NDNQI safe practices
- Lower overall missed nursing care
- Higher nurse-perceived quality of care
- Higher patient ratings of their hospital experience

Quality Outcome

- Lower mortality rates
- Lower patient fall rates
- Lower nosocomial infections
- Lower hospital-acquired pressure ulcer rates
- Lower central line-associated bloodstream infection rates

Magnet Hospitals in Illinois

- Advocate BroMenn Medical Center
- Advocate Christ Medical Center
- Advocate Good Samaritan Hospital
- Advocate Illinois Masonic Medical Center
- Advocate Lutheran General Hospital
- Advocate Sherman Hospital
- AMITA Health Adventist Medical Center Hinsdale
- AMITA Health Saint Francis Hospital Evanston
- Ann & Robert H. Lurie Children's Hospital of Chicago
- Cancer Treatment Centers of America – Chicago
- Carle Foundation Hospital and Carle Physician Group
- Edward Hospital
- Elmhurst Memorial Healthcare
- Loyola University Medical Center
- Memorial Medical Center
- Memorial Regional Health Services
- Mercy Health System – Mercy Harvard Hospital
- Mercy Health System – Mercy Health System Ambulatory Care Centers and Clinics
- North Shore University Health System – Evanston Hospital
- North Shore University Health System – Glenbrook Hospital
- North Shore University Health System – Highland Park Hospital
- North Shore University Health System – Skokie Hospital
- Northwest Community Healthcare
- Northwestern Lake Forest Hospital
- Northwestern Medicine Central DuPage Hospital

Magnet Hospitals in Illinois

- Northwestern Medicine Delnor Hospital
- Northwestern Memorial Hospital
- OSF Healthcare Saint Francis Medical Center (formerly OSF Saint Francis Medical)
- OSF Saint Anthony Medical Center
- OSF St. Joseph Medical Center
- Passavant Area Hospital
- Presence Saint Joseph Medical Center
- Presence Saints Mary and Elizabeth Medical Center
- Riverside Medical Center
- Rush Oak Park Hospital
- Rush University Medical Center
- Swedish Covenant Hospital
- Swedish American Health Center
- The Shirley Ryan Ability Lab
- The University of Chicago Medicine
- Unity Point Health-Methodist

Leadership Acumens for Magnet designation

